Columbia, SC 29210

01 Executive Center Dr., Suite 100

ublic Service Commission of South Carolina

(FAX)

P.001/002

Fax: 803-896-5199

www.psc.sc.gov

Complaint Form 2012-1711-42

Print

Date: August 8, 2	2012	
Complainant or	r Legal Representative Information: * Required Fields	
Name *	Tom Whitaker	
Firm (if applicable)	LakeView Sign Works, Inc.	
Mailing Address *	7030 Chelsea Day Lane	
City, State Zip *	Tega Cay SC Phone * 80	3 802 2178
E-mail *		
Name of Utility	Involved in Complaint: * Utilities Inc. Tega Cay Water Company	
	AT&T is the utility involved, please complete the attachment located at the end	of this form.
	aint (check appropriate box below.) *	
☐ Billing Error/A ☐ Disconnection ☐ Service Issue	n of Service Payment Arrangements Water Quality Meter Issue	Refusal to Connect Service Line Extension Issue
	cific) A proposed water and sewage increase by this company in Tega	Cay
Have you contacte	ted the Office of Regulatory Staff (ORS)? * Yes No ORS Contact	ti
company or its se tastes horrible, ar system in Tega C 2010 and with the have again just pr	pasic service. My wife and I have lived here for 31 years. I can honestly service. I have been overcharged many times and truly had to battle with and has this sulfur smell to it. I have black deposits in my commodes and Cay's older section is still in need of so many repairs and updates. This can increase they said they would start to update and had benchmarks the put a band aid fix on these problems. We are in a predicament here. I are water. I cannot afford the type of increase they are asking for. Please had.	them to correct these charges. My water is sometimes in the bath water. The company was granted a rate increase in at were to be met set up by DHEC. They m 69 years old and I have to work to keep
Relief Requested	d: * (This section must be completed. Attach additional information to this page	e if necessary.)
Deny their rate inc	ncrease. Not just a portion, but all of it. If they can't handle the problems,	
	R	CEIVEID
	6	1113 × ° 2012
		PSC SC MAIL / DMS
STATE OF SOUTH	TH CAROLINA) VERIFICATION	
COUNTY OF Y	York)	Internal Use Only
	Com Whitaker verify that I have read my complaint filed on OB	3/22/2012 Processed By Date Date *
compi the contains	ents thereof, and that said contents are true. Tom Whitaker	H.E.

Complainant's Signature

Public Service Commission of South Carolina 101 Executive Center Dr., Suite 100 Columbia, SC 29210



Phone: 803-896-5100 Fax: 803-896-5199 www.psc.sc.gov

Attachment to Complaint Form

Complete this page only if your complaint involves AT&T.

1.	. Was your AT&T service activated after September 30, 2009?		
		YES	□ио
2.	Does y	our bill from	AT&T include monthly charges for any of the following services?
		AT&T Inter	rnet Access Service (dial-up or DSL)
		AT&T Wire	eless Service
		AT&T U-ve	erse Service
		Caller ID	
		Complete C	hoice
		Preferred Pa	nck
		Long distan	ce service provided by any AT&T company